

MENASHA ADLDERMEN OCCASIONALLY ATTEND MEETINGS OF THIS BODY. IT IS POSSIBLE THAT A QUORUM OF COMMON COUNCIL, BOARD OF PUBLIC WORKS, ADMINISTRATION COMMITTEE, PERSONNEL COMMITTEE MAY BE ATTENDING THIS MEETING. (NO OFFICIAL ACTION OF ANY OF THOSE BODIES WILL BE TAKEN.)

CITY OF MENASHA
Board of Health
Menasha Health Department
February 13, 2008

8:15 AM

AGENDA

 [← Back](#)  [Print](#)

1. CALL TO ORDER

A.

2. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. January 9th , 2008



[Attachments](#)

3. REPORT OF DEPARTMENT HEADS/STAFF/CONSULTANTS

A. Lyme Disease Case Counts (2000-2007)

B. December 2007 Monthly Communicable Disease Report



[Attachments](#)

C. Menasha Health Department Annual Report 2006



[Attachments](#)

D. Health Department Relocation

E. School Nutrition Conference

F. Changes to School Immunization Law

4. ACTION ITEMS

A. Review of 60+ Wellness Screening Fees

B. Review of Weights / Measures Permit Fees.

5. HELD OVER BUSINESS

A. Aurora Community Needs Assessment Review

6. ADJOURNMENT

A.

Board of Health Members

Dorothy Jankowski, Lori Asmus, Susan Nett Candyce Rusin, Theresa Shoberg

"Menasha is committed to its diverse population. Our Non-English speaking population or those with disabilities are invited to contact the Menasha Health Department at 967-3520 at least 24-hours in advance of the meeting so special accommodations

can be made."

CITY OF MENASHA
Board of Health
Menasha Health Department
January 9, 2008

MINUTES DRAFT

 [← Back](#)  [Print](#)

1. CALL TO ORDER

Meeting called to order at 8:20 AM by Chairman C. Rusin. Members present: Lori Asmus, Dorothy Jankowski, Candyce Rusin, Dr. Teresa Shoberg, Susan Nett.

2. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. December 12, 2007 BOH Meeting Minutes

Moved by Dorothy Jankowski, seconded by Lori Asmus to Approve Minutes

Motion Passed
Results:

3. REPORT OF DEPARTMENT HEADS/STAFF/CONSULTANTS

A. Food Security in the Wisconsin WIC Population

S. Nett distributed a report on food security in the Wisconsin WIC population which discusses the difficulty this population has with providing their children enough food to eat. S. Nett explained the role of the public health nurses in assuring low income families apply for WIC as this is a supplemental food program providing nutritious foods for pregnant women and children birth to 5.

B. Public Health Preparedness Indicators

The latest Public Health Preparedness Indicators report was distributed. Wisconsin's score was a 6 out of a possible 10.

C. November 2007 Communicable Disease Report

The November 2007 Communicable Disease report was reviewed by board members. S. Nett discussed the response of one of the clinics in Menasha as to this report being available in their office for the nurses and physicians. The response for this particular clinic was that this report has not been distributed widely in their office and even if the physician receives it via email, the chances of them doing more than a cursory glance was slim due to the volume of emails they now currently receive on a daily basis. Dr. Shoberg indicated that the only time she has to view this report is at the monthly BOH meeting. S. Nett discussed the report being distributed quarterly in 2008 rather than monthly. S. Nett plans on providing board members with the city of Menasha communicable disease numbers monthly.

D. Emergency Preparedness Funding

Any remaining preparedness funds at the end of 2008 will not be allowed to be carried over so staff are looking at updating necessary equipment to be used during an emergency response such as a fax machine that has the capability of rapid programming of essential contact numbers, a portable copier to be able to be moved to a mass clinic site, emergency portable radios, etc.

4. ACTION ITEMS

A. Review of Parochial School Fees for 2008-2009 School Year

Moved by Lori Asmus, seconded by Dorothy Jankowski to Approve Parochial School Fees 2008-09

S. Nett discussed the proposed parochial school fees for the 2008-09 school year. The vision/hearing screenings (initial screening) would stay the same at \$9.25 per hour. The public health nurse (education, screening follow-up, health consultation) would stay the same at \$37 per hour. The public health aide would stay the same at \$26 per hour. The reason these two rates could stay the

same was the savings in the health insurance. The dental hygienist would increase from \$31 to \$32 per hour. The hygienist moves to 50% benefits so the health insurance cost increases. New for the next school year is the addition of the registered sanitarian who is now required by the Dept. of Ag to inspect the school lunch facilities. The proposed hourly rate would be \$37. The sanitarian estimates the inspection and time for doing the report would be 1-2 hours per school. C. Rusin questioned what the annual cost has been to the parochial schools. S. Nett indicated that Trinity has had an approximate annual cost of \$100. St. Mary's typical annual cost has been approx. \$325. Seton has requested services on a very limited basis and it is expected that the food service inspection would probably be the only service provided. With no further discussion, board members recommended to the common council for approval the proposed parochial school fees for 2008-09 school year.

Motion Passed
Results:

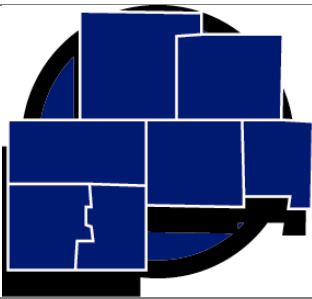
5. ADJOURNMENT

A.

Moved by Dorothy Jankowski, seconded by Lori Asmus to Move to adjourn

at 9:04 AM

Motion Passed
Results:



Fox Valley Public Health Preparedness Consortium

Appleton Health Department
Ph 920.832.6429

Calumet County Health Department
Ph 920.849.1432

Green Lake County Department of
Health & Human Services
Ph 920.294.4070

Marquette County Health
Department
Ph 608.297.3135

City of Menasha Health
Department
Ph 920.967.3520

Neenah Department of Public
Health
Ph 920.886.6155

Oshkosh Health Department
Ph 920.236.5030

Outagamie County Public Health
Division
Ph 920.832.5100

Waupaca County Department of
Health & Human Services
Ph 715.258.6323

Waushara County Health
Department
Ph 920.787.6590

Winnebago County Health
Department
Ph 920.232.3000

December 2007

Monthly Reportable Disease Bulletin

The data within this document is provisional.
Users are cautioned to consider carefully the provisional nature of this
information before using the data.

Reporting of communicable diseases is required by Wisconsin State Statute [Chapter 252.05](#) and Wisconsin Administrative Code [HFS 145.04](#). To obtain a copy of a reporting form, please call the State Division of Public Health Communicable Disease Section at (608) 267-7321, or visit the website at <http://dhfs.wisconsin.gov/communicable/diseasereporting/index.htm>. For a list of diseases that are reportable to your local public health department, please see the back of a DOH 4151 – Acute and Communicable Disease Case Report Form, the aforementioned website or [Appendix A](#) of HFS 145. Please note that Category I diseases or suspect diseases require immediate reporting to the local public health department.



INFECTIOUS DISEASE CASE OF THE MONTH

CASE STUDY:

A 50-yr. old female was seen in August 2007 for symptoms of high fever, muscle aches, fatigue and headache. Client reports that her first thoughts were that she was having a heart attack due to chest pain that she was experiencing. Symptoms also included right-sided facial swelling causing difficulty in opening her mouth. Client reports having seen four different physicians before receiving a diagnosis. Client was treated with amoxicillin. Symptoms persisted for one week after treatment was started.

DIAGNOSIS: Ehrlichiosis

DOES THIS DISEASE NEED TO BE REPORTED TO THE HEALTH DEPARTMENT? Yes

THE ROLE OF PUBLIC HEALTH:

- Verify diagnosis based on lab data and that surveillance case definition is met.
- Interview client / educate on prevention measures.
- Assure 4151 is completed and forwarded to WI DPH CD program.
- Complete the "Tick-Borne Rickettsial Disease Case Report" form – forward to WI DPH CD program.

EHRlichiosis FAST FACTS:

Did you know...

- In the upper Midwest, this disease is transmitted by the deer tick- the same tick that spreads Lyme disease.
- Symptoms begin 1 to 3 weeks after exposure.
- Most patients experience fever, muscle pain, severe headache and shaking chills. Less common are nausea, vomiting, acute weight loss, mental confusion, cough and skin rash.
- Re-infection is rare, but has been reported.

Fox Valley Public Health Preparedness Consortium
December 2007 Number of Cases

| | Calumet | Green Lake | Outagamie | Waupaca | Waushara | Winnebago | Appleton | Menasha | Neenah | Oshkosh | Marquette | December 2007 Consortium | December 2006 Consortium |
|---|---------|------------|-----------|---------|----------|-----------|----------|---------|--------|---------|-----------|--------------------------|--------------------------|
| <i>Pertussis (whooping cough) Confirmed</i> | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 4 | 2 |
| <i>Pertussis (whooping cough) Suspect</i> | 0 | 0 | 3 | 27 | 2 | 0 | 3 | 1 | 3 | 0 | 0 | 39 | 17 |
| Campylobacter | 0 | 0 | 1 | 1 | 0 | 1 | 2 | 0 | 1 | 0 | 0 | 6 | 10 |
| Cryptosporidiosis | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 5 |
| E. coli 0157:H7 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 |
| Giardiasis | 0 | 0 | 1 | 2 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 3 |
| Hepatitis B | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 3 | 0 |
| Hepatitis C | 0 | 0 | 0 | 1 | 3 | 0 | 1 | 0 | 0 | 0 | 0 | 5 | 7 |
| Lyme disease | 0 | 0 | 0 | 3 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 4 | 3 |
| Meningitis, bacterial | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 |
| Mycobacterial disease (nontuberculosis) | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 4 | 0 | 6 | 1 |
| Salmonellosis | 0 | 1 | 3 | 0 | 0 | 1 | 6 | 0 | 0 | 4 | 0 | 15 | 3 |
| STD: Chlamydia trachomatis infection | 2 | 3 | 11 | 12 | 4 | 3 | 13 | 2 | 1 | 7 | 1 | 59 | 76 |
| STD: Genital herpes infection | 1 | 0 | 3 | 4 | 1 | 0 | 3 | 1 | 0 | 5 | 0 | 18 | 13 |
| STD: Gonorrhea | 0 | 0 | 2 | 1 | 0 | 1 | 4 | 0 | 0 | 5 | 0 | 13 | 15 |
| STD: Syphilis | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 2 | 0 |
| Streptococcus pneumoniae invasive disease | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 3 | 2 |
| Toxic substance: Lead intoxication | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Varicella (chickenpox) | 0 | 1 | 0 | 0 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 4 | 0 |

Please Note:

- (1) Diseases listed in italics are Category I. All others are Category II.
- (2) Only diseases with at least one reported case during the month will be shown.

**Fox Valley Public Health Preparedness Consortium
December 2007 Incidence Rate per 100,000 Population**

| | Calumet | Green Lake | Outagamie | Waupaca | Waushara | Winnebago | Appleton | Menasha | Neenah | Oshkosh | Marquette | December 2007 Consortium | December 2006 Consortium | CY 2006 Consortium | Healthiest WI 2010 Objective* |
|---|------------|------------|-------------|-------------|-------------|------------|-------------|---------|------------|-------------|------------|--------------------------|--------------------------|--------------------|-------------------------------|
| <i>Pertussis (whooping cough) Confirmed</i> | 0.0 | 0.0 | 0.0 | 9.1 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 6.6 | 0.8 | 0.4 | 4.8 | ----- |
| <i>Pertussis (whooping cough) Suspect</i> | 0.0 | 0.0 | 9.1 | 81.7 | 6.1 | 0.0 | 9.1 | 3.0 | 9.1 | 0.0 | 0.0 | 7.9 | 3.6 | 51.2 | ----- |
| Campylobacter | 0.0 | 0.0 | 3.0 | 3.0 | 0.0 | 3.0 | 6.1 | 0.0 | 3.0 | 0.0 | 0.0 | 1.2 | 2.1 | 27.9 | 11.0 |
| Cryptosporidiosis | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.2 | 1.0 | 12.2 | ----- |
| E. coli 0157:H7 | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.2 | 0.0 | 2.9 | 3.0 |
| Giardiasis | 0.0 | 0.0 | 3.0 | 6.1 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.8 | 0.6 | 10.5 | ----- |
| Hepatitis B | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 3.0 | 0.0 | 0.6 | 0.0 | 6.7 | ----- |
| Hepatitis C | 0.0 | 0.0 | 0.0 | 3.0 | 9.1 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 1.0 | 1.5 | 26.6 | ----- |
| Lyme disease | 0.0 | 0.0 | 0.0 | 9.1 | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.8 | 0.6 | 33.1 | ----- |
| Meningitis, bacterial | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.2 | 0.0 | 0.8 | ----- |
| Mycobacterial disease (nontuberculosis) | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.0 | 12.1 | 0.0 | 1.2 | 0.2 | 4.4 | ----- |
| Salmonellosis | 0.0 | 3.0 | 9.1 | 0.0 | 0.0 | 3.0 | 18.2 | 0.0 | 0.0 | 12.1 | 0.0 | 3.0 | 0.6 | 15.5 | 8.0 |
| STD: Chlamydia trachomatis infection | 6.1 | 9.1 | 33.3 | 36.3 | 12.1 | 9.1 | 39.3 | 6.1 | 3.0 | 21.2 | 6.6 | 11.9 | 15.9 | 195.7 | 138.0 |
| STD: Genital herpes infection | 3.0 | 0.0 | 9.1 | 12.1 | 3.0 | 0.0 | 9.1 | 3.0 | 0.0 | 15.1 | 0.0 | 3.6 | 2.7 | 44.3 | ----- |
| STD: Gonorrhea | 0.0 | 0.0 | 6.1 | 3.0 | 0.0 | 3.0 | 12.1 | 0.0 | 0.0 | 15.1 | 0.0 | 2.6 | 3.1 | 26.6 | 63.0 |
| STD: Syphilis | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3.0 | 0.0 | 0.4 | 0.0 | 2.1 | 0.2 |
| Streptococcus pneumoniae invasive disease | 0.0 | 0.0 | 3.0 | 0.0 | 3.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.6 | 0.4 | 5.5 | ----- |
| Toxic substance: Lead intoxication | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.2 | 0.2 | 2.1 | 0.0 |
| Varicella (chickenpox) | 0.0 | 3.0 | 0.0 | 0.0 | 0.0 | 6.1 | 0.0 | 0.0 | 3.0 | 0.0 | 0.0 | 0.8 | 0.0 | 13.2 | ----- |

Please Note:

(1) Diseases listed in *italics* are Category I. All others are Category II.

(2) Only diseases with at least one reported case during the month will be shown.

(3) Bolded incidence rate in the agency specific columns indicates that the incidence rate is HIGHER than the consortium-wide monthly incidence rate.

(4) Bolded incidence rate in the "CY 2006 Consortium" column indicates that the incidence rate is HIGHER than the Healthiest Wisconsin 2010 Objective.

* Data does not include Marquette County.

**Healthiest Wisconsin 2010 Objectives are an annualized incidence rate per 100,000.

Fox Valley Public Health Preparedness Consortium
December 2007 Total Number of Cases

| | Jan-07 | Feb-07 | Mar-07 | Apr-07 | May-07 | Jun-07 | Jul-07 | Aug-07 | Sep-07 | Oct-07 | Nov-07 | Dec-07 | 2007 YTD |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
| <i>Cholera</i> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 |
| <i>Foodborne or waterborne outbreaks</i> | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| <i>Haemophilus influenzae</i> invasive disease | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 4 |
| <i>Meningococcal disease</i> | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 3 |
| <i>Pertussis (whooping cough) Confirmed</i> | 2 | 0 | 1 | 0 | 1 | 1 | 3 | 4 | 0 | 3 | 21 | 4 | 40 |
| <i>Pertussis (whooping cough) Probable</i> | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 2 | 0 | 2 | 0 | 0 | 6 |
| <i>Pertussis (whooping cough) Suspect</i> | 16 | 14 | 5 | 7 | 6 | 2 | 7 | 17 | 4 | 13 | 86 | 39 | 216 |
| <i>Tuberculosis</i> | 1 | 0 | 2 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 1 | 0 | 6 |
| Arboviral infection (encephalitis/meningitis) | 0 | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 0 | 0 | 0 | 0 | 3 |
| Babesiosis | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Blastomycosis | 2 | 0 | 0 | 1 | 1 | 2 | 0 | 1 | 2 | 0 | 0 | 0 | 9 |
| Brucellosis | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 |
| Campylobacter | 4 | 5 | 8 | 6 | 11 | 8 | 10 | 14 | 12 | 13 | 5 | 6 | 102 |
| Cat-scratch Disease | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 4 |
| Cryptosporidiosis | 3 | 2 | 2 | 0 | 3 | 4 | 14 | 10 | 25 | 9 | 4 | 1 | 77 |
| Cyclosporiasis | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| E. coli 0157:H7 | 0 | 1 | 1 | 2 | 0 | 4 | 4 | 2 | 3 | 2 | 1 | 1 | 21 |
| Ehrlichiosis | 0 | 2 | 0 | 0 | 1 | 3 | 2 | 0 | 6 | 2 | 1 | 0 | 17 |
| Encephalitis, viral | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 3 |
| Giardiasis | 2 | 2 | 3 | 2 | 5 | 6 | 4 | 6 | 4 | 9 | 3 | 4 | 50 |
| Hepatitis B | 1 | 2 | 3 | 1 | 2 | 1 | 0 | 3 | 3 | 1 | 1 | 3 | 21 |
| Hepatitis C | 15 | 4 | 9 | 10 | 5 | 10 | 12 | 5 | 5 | 8 | 6 | 5 | 94 |
| Histoplasmosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Kawasaki disease | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 3 |
| Legionellosis | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 2 |
| Listeriosis | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Lyme disease | 11 | 6 | 3 | 3 | 16 | 37 | 81 | 62 | 22 | 24 | 10 | 4 | 279 |
| Meningitis, bacterial | 0 | 0 | 1 | 0 | 0 | 0 | 3 | 0 | 0 | 1 | 1 | 1 | 7 |
| Meningitis, viral | 5 | 0 | 1 | 0 | 0 | 1 | 2 | 2 | 2 | 3 | 1 | 0 | 17 |
| Mumps: Confirmed | 0 | 2 | 3 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 6 |
| Mumps: Probable | 0 | 4 | 4 | 7 | 3 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 19 |
| Mumps: Suspect | 0 | 0 | 9 | 4 | 1 | 2 | 1 | 0 | 0 | 0 | 1 | 0 | 18 |
| Mycobacterial disease (nontuberculosis) | 7 | 1 | 6 | 3 | 4 | 3 | 4 | 7 | 3 | 3 | 6 | 6 | 53 |
| Salmonellosis | 9 | 8 | 6 | 8 | 7 | 8 | 11 | 13 | 10 | 9 | 2 | 15 | 106 |
| Shigellosis | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 3 | 0 | 0 | 1 | 0 | 5 |
| STD: Chlamydia trachomatis infection | 99 | 84 | 101 | 91 | 81 | 54 | 74 | 87 | 97 | 103 | 83 | 59 | 1013 |
| STD: Genital herpes infection | 22 | 15 | 14 | 15 | 21 | 18 | 22 | 17 | 16 | 25 | 16 | 18 | 219 |
| STD: Gonorrhea | 16 | 6 | 6 | 14 | 17 | 7 | 9 | 16 | 16 | 16 | 22 | 13 | 158 |
| STD: Pelvic inflammatory disease | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 2 |
| STD: Syphilis | 1 | 0 | 0 | 1 | 1 | 2 | 1 | 0 | 0 | 1 | 1 | 2 | 10 |
| Streptococcus group A invasive disease | 0 | 0 | 1 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 4 |
| Streptococcus group B invasive disease | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 1 | 0 | 0 | 2 | 0 | 6 |
| Streptococcus pneumoniae invasive disease | 3 | 1 | 3 | 1 | 7 | 1 | 0 | 1 | 0 | 1 | 2 | 3 | 23 |
| Toxic substance: Lead intoxication | 3 | 0 | 0 | 1 | 0 | 1 | 1 | 3 | 2 | 2 | 0 | 1 | 14 |
| Trichinosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 |
| Varicella (chickenpox) | 18 | 1 | 3 | 4 | 54 | 7 | 0 | 0 | 0 | 5 | 10 | 4 | 106 |

Please Note:

(1) Diseases listed in *italics* are Category I. All others are Category II.

(2) Only diseases with at least one reported case during the year will be shown.

Cumulative Number of Confirmed Human Cases of Avian Influenza A/(H5N1) Reported to WHO

3 January 2008

| Country | 2003 | | 2004 | | 2005 | | 2006 | | 2007 | | Total | |
|----------------------------------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|-------|--------|
| | cases | deaths | cases | deaths | cases | deaths | cases | deaths | cases | deaths | cases | deaths |
| Azerbaijan | 0 | 0 | 0 | 0 | 0 | 0 | 8 | 5 | 0 | 0 | 8 | 5 |
| Cambodia | 0 | 0 | 0 | 0 | 4 | 4 | 2 | 2 | 1 | 1 | 7 | 7 |
| China | 1 | 1 | 0 | 0 | 8 | 5 | 13 | 8 | 5 | 3 | 27 | 17 |
| Djibouti | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 |
| Egypt | 0 | 0 | 0 | 0 | 0 | 0 | 18 | 10 | 25 | 9 | 43 | 19 |
| Indonesia | 0 | 0 | 0 | 0 | 20 | 13 | 55 | 45 | 41 | 36 | 116 | 94 |
| Iraq | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 2 | 0 | 0 | 3 | 2 |
| Lao People's Democratic Republic | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 2 | 2 |
| Myanmar | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 |
| Nigeria | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
| Pakistan | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
| Thailand | 0 | 0 | 17 | 12 | 5 | 2 | 3 | 3 | 0 | 0 | 25 | 17 |
| Turkey | 0 | 0 | 0 | 0 | 0 | 0 | 12 | 4 | 0 | 0 | 12 | 4 |
| Viet Nam | 3 | 3 | 29 | 20 | 61 | 19 | 0 | 0 | 8 | 5 | 101 | 47 |
| Total | 4 | 4 | 46 | 32 | 98 | 43 | 115 | 79 | 85 | 58 | 348 | 216 |

Total number of cases includes number of deaths.
 WHO reports only laboratory-confirmed cases.
 All dates refer to onset of illness.

Menasha Health Department

Annual Report

2006

The mission of the Menasha Health Department is to promote public health, protect consumers, and encourage a high standard of environmental health in response to the needs of the community and school district. This report is a summary of public health/school health services provided in 2006.

Public Health

Public health services in 2006 consisted of communicable disease control, city-wide older adult health program, nursing assessment and guidance for residents of all ages, and information and referral to other agencies. The total number of client visits in 2006 was 7,063. Individuals and families receiving services continue to present with more complex needs requiring more time involvement. Changing demographics in city residents (increase in non-English speaking) also accounts for increased demand for public health nursing services.

The health department actively participates in the Fox Cities Healthcare Partnership. The major project of this group in 2006 was the continuation of the Walk to Win program with the inclusion of children. Schools were again targeted in 2006 to actively promote this program among their students.

The health department continues to participate in the regional public health preparedness consortia established in 2002. The purpose of the consortia is to have the capability to respond to a public health emergency either from an act of terrorism or a widespread communicable disease outbreak such as pandemic flu. The health department tested its capacity to do a mass clinic by giving employee flu shots in a mass clinic setting. The average through-put time was 5 minutes. Preparedness planning will continue into 2007 and the future.

The following communicable diseases were reported in:

| | | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|---------------------------------------|---------------|-------------|-------------|-------------|
| Chlamydia | } Sexually | 43 | 59 | 41 |
| Gonorrhea | } Transmitted | 20 | 15 | 4 |
| Genital Herpes | } Diseases | 7 | 6 | 9 |
| (Primary Infection) | | | | |
| Hepatitis C | | 8 | 6 | 6 |
| Giardiasis | | 5 | 4 | 0 |
| Campylobacter Enteritis | | 2 | 4 | 2 |
| Salmonellosis | | 1 | 2 | 2 |
| Hepatitis B | | 1 | 5 | 3 |
| Blastomycosis | | 1 | 0 | 0 |
| Lyme Disease | | 1 | 1 | 1 |
| Non tuberculous Mycobacterial Disease | | 2 | 0 | 2 |
| Streptococcus group B | | 2 | 0 | 1 |
| E-Coli | | 1 | 0 | 0 |
| Pertussis | | 17 | 2 | 0 |

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|-----------------------------------|-------------|-------------|-------------|
| Strep pneumoniae invasive disease | 1 | 1 | 1 |
| Cryptosporidiosis | 0 | 0 | 1 |
| Histoplasmosis | 0 | 0 | 1 |
| Dengue Fever | 0 | 0 | 1 |
| Legionellosis | 0 | 0 | 1 |

The Menasha Health Department has 2 immunization clinics per month. Following is a summary of immunization information for:

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|---|-------------|-------------|-------------|
| Number of participants (Regular scheduled clinics) | 361 | 364 | 375 |
| Number of immunizations given | 775 | 885 | 809 |
| Number of Hepatitis A doses – Adult | 6 | 4 | 9 |
| Number of Hepatitis B doses - Adult | 65 | 64 | 51 |
| Number of Employee Flu Shots (includes city, utility and school district employees, and their spouses) | 120 | 219 | 229 |
| Number of Senior Citizen Flu Shots* | * | 76 | 145 |

* Provided by Theda Care at Senior Center. Due to flu vaccine shortages, no public clinic was held in 2004 at the Menasha Senior Center, and in 2005, the public clinic was postponed until November.

Different types of screenings are provided throughout the year either through public health nursing services, the prevention program, or 60+ adult health services. The following screenings were provided:

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|---|-------------|-------------|-------------|
| Blood Pressure (public health) | 324** | 422 | 220 |
| TB Skin Tests | 9** | 43 | 19 |
| Urine Screening (High School Wrestlers) | 30 | 22 | 25 |

** Data for 8 months

60+ Health Screenings

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|----------------|-------------|-------------|-------------|
| Skin Cancer | 35 | 38 | 39 |
| Blood Pressure | 902 | 829 | 846 |
| Urine | 7 | 6 | 5 |
| Colorectal | 5 | 10 | 13 |

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|----------------------|-------------|-------------|-------------|
| Osteoporosis** | 19 | 13 | 0 |
| Anemia** | 6 | 0 | 0 |
| Wellness Panel* | 137 | 86 | 111 |
| Hand Massage/Massage | 26 | 16 | 29 |

* Coordinated with Theda Care Labs.

**Not offered in 2005, 2006 (Portable osteoporosis equipment not available)

Environmental Health

The environmental health program consists of an inspection program of eating, drinking, and retail food establishments, and investigations of complaints of human health hazards. The sanitarian is also in charge of the weights and measures program for the city.

| | | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|------------------------------|------------------------------------|-------------|-------------|-------------|
| Inspections: | Eating and Drinking Establishments | 133 | 128 | 101 |
| | Retail Food Establishments | 87 | 37 | 48 |
| | Vending Machines (Food) | 39 | 28 | 24 |
| | Temporary Food Stands | 42 | 33 | 36 |
| | Pools and Pool Sampling | 7 | 8 | 10 |
| | Mobile Home Park | 1 | 1 | 1 |
| | Weights/Measures | 302 | 305 | 359 |
| | Asbestos (Contract with DNR) | 36 | 36 | 33 |
| | Non-DNR Asbestos | | 7 | 9 |
| | Tattoo Establishments | 2 | 2 | 2 |
| Human Hazard Investigations: | Air Quality | 16 | 15 | 16 |
| | Lead Hazards | 20 | 27 | 18 |
| | Radon Kits | 14 | 118 | 21 |
| | Housing | 29 | 19 | 31 |
| | Animal Issues/Animal Feces | 22 | 58 | 89 |
| | Sewage | 9 | 7 | 9 |
| | Solid Waste (Garbage) | 51 | 39 | 58 |
| | Other: Rodents, etc. | 9 | 26 | 23 |

School Health

The Menasha School District contracts with the Menasha Health Department for school nursing services. In addition to vision, hearing, scoliosis, and dental screenings, the nurses provide individual health assessments including health counseling, monitor the health and coordination of health services for students with special health care needs, and provide classroom instruction on dental health, human growth and development including prevention of sexually transmitted diseases, and various other health related topics. Health department staff also provide CPR/FIRST AID certification that is now required for school employees. All school buildings are now equipped with AEDs (automatic external defibrillators). Each school has an identified emergency response team trained by health department staff. Emergency training drills are done three times during the school year in each school.

| | <u>2004</u> | <u>2005</u> | <u>2006</u> |
|---|-------------|-------------|-------------|
| Number of individual contacts for assessment, health procedures, health teaching, etc. | 7628* | 8312 | 9971 |
| Number of individual health conferences (IEP meetings, core team meetings, etc.) | 67* | 210 | ** |
| Vision screenings | 1550 | 1622 | 1701 |
| Number referred | 61 | 96 | 92 |
| Hearing screenings | 1142 | 1570 | 1222 |
| Number referred | 68 | 71 | 59 |
| Scoliosis screenings | 259 | 299 | 223 |
| Number referred | 1 | 1 | 0 |
| Dental screenings | 1500 | 1522 | 1640 |
| Number referred | 213 | 208 | 296 |

*Jan. through Aug.

**Not available

The staffing pattern in the health department for 2006 consisted of a full-time director/PHN, a full-time sanitarian/sealer of weights and measures, 2 full-time public health nurses (PHN), 1 full-time public health aide, 2 part-time PHN, part-time dental hygienist, 4 part-time school health aides, and 2 limited part-time vision/hearing screeners.

The funding sources for the health department consist of grants, fees for service, license fees, school health contractual arrangements, donations, and city tax levy monies. Total expenditures for 2006 were \$560,901. The local tax levy provided \$156,436 with the remaining \$404,465 coming from all other sources of funding combined.